

U.S. Department of Justice  
United States Marshals Service

Case 1:04-cv-10642-RWZ

Document 9

Filed 08/02/2004

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PROCESS RECEIPT AND RETURN

PLAINTIFF <b>UNITED STATES OF AMERICA</b>		COURT CASE NUMBER <b>CA No. 04-10642-RWZ</b>	
DEFENDANT <b>928 Oakley Street, New Bedford, Massachusetts</b>		TYPE OF PROCESS <b>Complaint and Warrant and Monition</b>	
<b>SERVE AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <b>PETER MEDEIROS, #24714-038</b>		
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) <b>Plymouth (M.C.I.), P.O. Box 207, South Carver, MA 02366</b>		
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served, with this Form - 285	
Shelbey D. Wright, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, MA 02210		Number of parties to be served in this case	
		Check for service on U.S. Agent	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)			
Please serve the attached Verified Complaint and Warrant & Monition upon the above-referenced individual by certified mail, return receipt requested.			
KBW x3364			
Signature of Attorney or other Originator requesting service on behalf of: <i>Shelbey D. Wright / LJ</i>		TELEPHONE NUMBER (617) 748-3100	DATE May 7, 2004
<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT			
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <u>38</u>	District to Serve No. <u>38</u>
Signature of Authorized USMS Deputy or Clerk <i>Wright / LJ</i>		Date <u>5/17/04</u>	
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.			
<input checked="" type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).			
Name and title of individual served (If not shown above).		<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)		Date of Service <u>6/7/04</u>	Time am pm
Signature of U.S. Marshal or Deputy <i>Wright / LJ</i>			
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges
Advance Deposits	Amount Owed to US Marshal or	Amount or Refund	
REMARKS: <u>5/17 Certify # 7002 0510 0004 3543 7364</u> <u>Returned Undelivered</u>			

PRIOR EDITIONS MAY  
BE USED

1. CLERK OF THE COURT

FORM USM 285 (Rev. 12/15/80)

☐ USMS RECORD

☐ NOTICE OF SERVICE

☐ BILLING STATEMENT

☐ ACKNOWLEDGMENT OF RECEIPT